

# BOWLS SOUTH AFRICA

## OPEN INTER-DISTRICT TOURNAMENT 2019

### MEN'S TEAM ENTRY FORM

<b>DISTRICT</b>	
-----------------	--

NAME OF MANAGER \_\_\_\_\_

CONTACT NUMBER DURING TOURNAMENT \_\_\_\_\_

TEAM A	Known Name and Surname	Age	Bowls SA No.
Skip			
Third			
Second			
Lead			

TEAM B	Known Name and Surname	Age	Bowls SA No.
Skip			
Third			
Second			
Lead			
Reserve			

**ALLERGIES, ILLNESS OR CHRONIC CONDITIONS OF PLAYERS**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

District Contact No. \_\_\_\_\_

District e-mail \_\_\_\_\_

Signed District Secretary \_\_\_\_\_

Date \_\_\_\_\_